PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where

CURRENT CORRESPOND	tions. ENCE ADDRESS (Note: Use Block 1 for	any change of address)]	Note: A certificate o	f mailing can on	ly be used f	or domestic mailings of the for any other accompanying
20005	7590 09/07/2005		TDA	į	papers. Each addition	al paper, such as	an assignm	ent or formal drawing, must
20995	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CARLID	715	λ,				
2040 MAIN STI	RTENS OLSON & BE	CAR LLY .	4	名\ 1	I hereby certify that t	ertificate of Mail this Fee(s) Transr	nittal is bein	g deposited with the United
FOURTEENTH		, DE	C 0 5 2005	\$ 2	States Postal Service	with sufficient po	ostage for fir FEE address	ng deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
IRVINE, CA 92		(g DE(C 0 9 7803		transmitted to the US	PTO (571) 273-2	885, on the	date indicated below.
/06/2005 BABRAHA2 000		17		<i>&</i> /	Pui Tong	Ho 12	<u> </u>	(Depositor's name)
FA 0504	300 00 00	W.T.	MOEMARMO	y [- Kr	~YX	D	(Signature)
FC:2501 FC:1504	700.00 OP 300.00 OP	*	DEMIN	Ì	December	1. 200	;	(Date)
FC:8001	30.00 OP							
APPLICATION NO.	FILING DATE	FIRST NAME		D INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/020,544 11/29/2001		Robert M. H		Hamilton		BRE4-M92A		8562
APPLN. TYPE	nonprovisional YES \$700 \$300		BLICATION FEE	TOTAL FEE	(S) DUE	DATE DUE		
nonprovisional				\$300 CLASS-SUBCLASS		\$1000		12/07/2005
EX			IT .			J		
MITCHEL	L, TEENA KAY	3743			128-204180			
CFR 1.363).	ence address or indication of "F		(1) the nam	nes of u	he patent front page, p to 3 registered pate			obe, Marten,
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-0	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us	Correspondence	(1) the nam or agents Ol (2) the nam- registered a 2 registered	nes of up R, alterne ne of a si attorney I patent	p to 3 registered pate	a member a mes of up to		obe, Marten, on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-(Number is required.	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 2 or more recent) attached. Us	Correspondence ation form e of a Customer	(1) the nam or agents Ol (2) the nam- registered a 2 registered listed, no na	nes of up OR, alternate of a stattorney I patent arms will	p to 3 registered pate natively, single firm (having as or agent) and the na attorneys or agents. I I be printed.	a member a mes of up to		
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-C Number is required. 3. ASSIGNEE NAME A	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 2 or more recent) attached. Us	Correspondence ation form e of a Customer BE PRINTED ON T	(1) the nam or agents Ol (2) the nam registered a 2 registered listed, no na	nes of up OR, aftern ne of a si attorney I patent ame will (print or	p to 3 registered pate natively, single firm (having as or agent) and the nat attorneys or agents. I 1 be printed.	a member a mes of up to f no name is 3	Olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-C Number is required. 3. ASSIGNEE NAME A	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us ND RESIDENCE DATA TO E 15 ess an assignee is identified bh in 37 CFR 3.11. Completion	Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NOT	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no na THE PATENT data will appear I a substitute for	nes of up PR, afternee of a stattorney I patent ame will (print or ear on the	p to 3 registered pate natively, single firm (having as or agent) and the nat attorneys or agents. I 1 be printed.	a member a 2 mes of up to f no name is 3 mee is identified	Olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI Market Sorm PTO/SI PT	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us ND RESIDENCE DATA TO E tess an assignee is identified b in 37 CFR 3.11. Completion GNEE Respiratory F	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no nather than 10 per	nes of up R, altern ne of a si attorney I patent arme will (print or ar on th or filing	p to 3 registered pate natively, ingle firm (having as or agent) and the na attorneys or agents. I 1 be printed. r type) ne patent. If an assig g an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mee is identified DUNTRY) Irvine	olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI Market Sorm PTO/SI PT	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us ND RESIDENCE DATA TO E 12 cess an assignee is identified bh in 37 CFR 3.11. Completion GNEE	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no nather than 10 per	nes of up R, altern ne of a si attorney I patent arme will (print or ar on th or filing	p to 3 registered pate natively, ingle firm (having as or agent) and the na attorneys or agents. I 1 be printed. r type) ne patent. If an assig g an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mee is identified DUNTRY) Irvine	olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI Market Sorm PTO/SI PT	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us ND RESIDENCE DATA TO E 12 as an assignee is identified be in 37 CFR 3.11. Completion GNEE Respiratory Final interest of the completion	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no na THE PATENT data will appear a substitute for a substitute for a substitute for inted on the part of Payment of F	nes of up R, alternee of a sattorney il patent ame will (print or far on the or filing E: (CITY) atent):	p to 3 registered pate natively, single firm (having as or agent) and the nar attorneys or agents. I be printed. r type) ne patent. If an assig an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mee is identified DUNTRY) Irvine Corporation or oth	olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIGNEE NAME A PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIGNEE THE Please check the appropriate the following fee(s). Issue Fee	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 12 or more recent) attached. Us ND RESIDENCE DATA TO E 12 these an assignee is identified be in 37 CFR 3.11. Completion GNEE Respiratory F iate assignee category or category are enclosed:	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no nather than 10 registered as will appear a substitute for the PATENT of the part of the	nes of up R, alternee of a sattorney if a patent arme will (print or far on the or filling E: (CIT) attent):	p to 3 registered pate natively, single firm (having as or agent) and the natattorneys or agents. I be printed. r type) ne patent. If an assig an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mee is identified DUNTRY) Irvine Corporation or others.	olso	on & Bear LL
CFR 1.363). Change of corresp Address form PTO/SI Marge Address form PTO/SI Marge Address form PTO/SB/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: University of the PLEASE NOTE of the Please Check the appropriate of the Please Check the Additional Check the Please Check the Additional Check the Please Check the Additional Check the Please Check the Plea	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 1/2 or more recent) attached. Us ND RESIDENCE DATA TO E 1/2 the sess an assignee is identified be him 37 CFR 3.11. Completion GNEE Respiratory E 1/2 the session of the case of th	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no na THE PATENT data will appear a substitute for a substitute for the part of Payment of Fayment b	nes of upR, alternee of a sharp and a sharp and a sharp and and and are will (print or filing E: (CIT)) tenternee of a sharp and a sharp and the control of	p to 3 registered pate natively, single firm (having as or agent) and the nationarys or agents. I be printed. Trype) The patent. If an assign an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mes is identified DUNTRY) Irvine Corporation or others and a second seco	olsobelow, the o	document has been filed for
CFR 1.363). Change of corresp Address form PTO/SI Marge of Corresp Address form PTO/SI Marge of Corresp Address form PTO/SB/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIGNEE NAME OF ASSIGNEE OF A SIGNEE OF CORRESP OF CO	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 1/2 or more recent) attached. Us ND RESIDENCE DATA TO E 1/2 the sess an assignee is identified be him 37 CFR 3.11. Completion GNEE Respiratory E 1/2 the session of th	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri 4b	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no na THE PATENT data will appear a substitute for a substitute for the part of Payment of Fayment b	nes of upR, alternee of a sharp and a sharp and a sharp and and and are will (print or filing E: (CIT)) tenternee of a sharp and a sharp and the control of	p to 3 registered pate natively, single firm (having as or agent) and the nationarys or agents. I be printed. Trype) The patent. If an assign an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mes is identified DUNTRY) Irvine Corporation or others and a second seco	olsobelow, the o	document has been filed for
CFR 1.363). Change of corresp Address form PTO/SI Address form PTO/SI PTO/SI AT; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIGNEE PLEASE NOTE: Unit recordation as set fort (B) NAME OF ASSIGNEE PLEASE Check the appropriate the following fee(s). Issue Fee Publication Fee (NAME) Advance Order - 15. Change in Entity Sta	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 1/2 or more recent) attached. Us ND RESIDENCE DATA TO E 1/2 the sess an assignee is identified be him 37 CFR 3.11. Completion GNEE Respiratory E 1/2 the session of t	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri 4b ed)	(1) the nam or agents Of (2) the nam registered a 2 registered listed, no na THE PATENT data will appear a substitute for a	mes of up R, afterney at each of a sharp will patent arme will (print or far on the or filing E: (CITY) at each or filing the tent): Gee(s): In the arm on the arm of the arm on the arm on the arm on the arm on the arm of the arm of the arm on the arm of the arm	p to 3 registered pate natively, single firm (having as or agent) and the nationarys or agents. I be printed. I type) The patent. If an assignment. Y and STATE OR CO	a member a 2 mes of up to f no name is 3 mes is identified DUNTRY) Irvine Corporation or other conclused. 88 is attached. charge the requiration of conclusion of the conclusion of the conclusion.	below, the o	document has been filed for coup entity Government Government Credit any overpayment, to copy of this form).
CFR 1.363). Change of corresp Address form PTO/SI Address form PTO/SI PTO/SI/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIGNEE PLEASE Check the appropriate. The following fee(s) Issue Fee Publication Fee (Name and Advance Order - 10 Advance Order - 10 Advance Check the Interpretation of the USF (NoTE: The Issue Fee and Interpretation of the USF (NoTE: The Issue Fee and Interpretation of the USF)	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indici2 or more recent) attached. Us ND RESIDENCE DATA TO Bess an assignee is identified ben in 37 CFR 3.11. Completion GNEE Respiratory Final assignee category or category are enclosed: It is small entity discount permitted of Copies 10 tus (from status indicated aboves SMALL ENTITY status. See It is publication fee (if required).	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri 4b ed) 37 CFR 1.27. use Fee and Publicat will not be accepted	(1) the nam or agents Of (2) the nam registered a 2 registered a 2 registered listed, no nather than 1 a substitute for the part of the payment of the payme	nes of up R, alterney are of a sharp are of a sharp are will (print or are on the or filing E: (CIT) attent): Fee(s): In the arm by credit ctor is hount Numer tis no	p to 3 registered pate natively, single firm (having as or agent) and the natattorneys or agents. I be printed. I type) The patent. If an assignment. Y and STATE OR CO. Individual	a member a 2 mes of up to f no name is 3 mes is identified DUNTRY) Irvine Corporation or other conclused. See is attached. Charge the requiration of conclusion of the conclusion of the conclusion.	below, the o	document has been filed for coup entity Government Government Credit any overpayment, to copy of this form).
CFR 1.363). Change of corresp Address form PTO/SI Address form PTO/SI PTO/SI/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIGNEE PLEASE Check the appropriate. The following fee(s) Issue Fee Publication Fee (Name and Advance Order - 10 Advance Order - 10 Advance Check the Interpretation of the USF (NoTE: The Issue Fee and Interpretation of the USF (NoTE: The Issue Fee and Interpretation of the USF)	ondence address (or Change of 3/122) attached. ication (or "Fee Address" Indic 1/2 or more recent) attached. Us ND RESIDENCE DATA TO E less an assignee is identified bh in 37 CFR 3.11. Completion GNEE Respiratory Fiate assignee category or category are enclosed: It of Copies 10 tus (from status indicated aboves SMALL ENTITY status. See ITO is requested to apply the Iss d Publication Fee (if required) records of the United States Pate 1/2 or more records of the United States Pate 1/2 or more recently attached.	Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT (B Products, pries (will not be pri 4b ed) 37 CFR 1.27. use Fee and Publicat will not be accepted	(1) the nam or agents Of (2) the nam registered a 2 registered a 2 registered listed, no nather than 1 a substitute for the part of the payment of the payme	nes of up R, alterney are of a sharp are of a sharp are will (print or are on the or filing E: (CIT) attent): Fee(s): In the arm by credit ctor is hount Numer tis no	p to 3 registered patenatively, single firm (having as or agent) and the narattorneys or agents. I be printed. Trype) The patent. If an assignment. The patent of the fee (s) is estimated and start of the fee (s) is estimated at the patent of the fee (s) is estimated at the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the patent of the fee (s) is estimated by the fee (s) is estimated	a member a 2 mes of up to f no name is 3 mes is identified DUNTRY) Irvine Corporation or other conclused. See is attached. Charge the requiration of conclusion of the conclusion of the conclusion.	below, the object of the application agent; or the	document has been filed for coup entity Government copy of this form). CFR 1.27(g)(2). ation identified above. the assignee or other party in

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.